

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ref: Appeals Board.
Commissioner for Patents.
USPTO
P.O. Box 1450.
Alexandria VA 22313
-1450.

2. Article Number
(Transfer from serv)

7007 3020 0002 9441 0841

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery restricted to addressee only?
If YES, enter delivery address below: ☐ Yes ☐ No

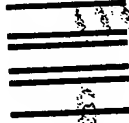
RECEIVED
APR 13 2009

USPTO MAIL CENTER

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

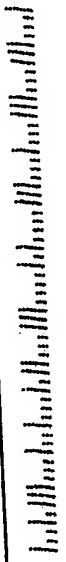
UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. C-19

• Sender: Please print your name, address, and ZIP+4 in this box •

Rajasingham.
Whicernium M Groverne.
PO Box 34512
Bethesda MD 20827.



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